OIPA		PART	B - FEE(S	) TRAN	SMITTAL		,	
Complete and send this form, together with applicable fee(s), to: Mail					Mail Stop ISSUE FEE Commissioner for Patents			
OCT 1 2 2004 55					P.O. Box 1450 Alexandria, Virginia 22313-1450			
NOTALION AND THE	·				703) 746-4000	deal Distriction I allowed E a	hald he are found that	
appropriate All further	form should be used for tra- correspondence including the ed below or directed otherwis- tions.	Patent, advance of in Block 1, by f	rders and not a) specifying	ification o	f maintenance fees respondence address	will be mailed to the current c: and/or (b) indicating a sen-	nould be completed where correspondence address as arate "FER ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
27107	7590 08/19/2004			£.	ave its own certifica	te of mailing or transmission.	ent of formal drawing, must	
RICHARD A. JOEL ESQ.					Co	rtificate of Mailing or Trans	emission	
496 KINDERKAMACK ROAD ORADELL, NJ 07649					tates Postal Service	his Fee(s) Transmittal is bein with sufficient postage for fir il Stop ISSUE FEE address PTO (703) 746-4000, on the c	st class mail in an envelope above, or being facsimile	
10/12/2004 JADDO2 00000012 10065601					ansmitted to the US	PTO (703) 746-4000, on the o		
CAT AA AB					-hra	cy Kyspoli,	(Depositor's name)	
01 FC:2501 685.00 OP						up Kentala	(Signature)	
						10/12/04	(Oate)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFLEMATION NO.		
10/065,601 11/01/2002			John N	John Melsaac		P02-210-MCI	5958	
TITLE OF INVENTION	i: FOOD FORMING APPARA	TUS						
APPLN. TYPE	SMALL ENTITY	issue per		PUB	LICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$665			\$0	\$6.682	11/19/2004	
EXAMINER ART U			NIT CLASS-SUBCLASS					
DEL SOLE, JOSEPH S 172			?		25-150000	_		
1. Change of corresponde	ence address or indication of "F	co Address" (37	2. For prin	ting on the	e patent front page, I	ist. D	14 T -1 F -	
CFR 1.363).  Change of correspondence address (or Change of Correspondence or agents OR, atternatively,							catholog, 139	
Address form PTO/SB/122) attached.								
[] "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent autorneys or agents. If no name is listed, no name will be printed.				
	ND RESIDENCE DATA TO E				• •			
recordation as set fort	css an assignee is identified b h in 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will epp Tasubstitute	car on the for filing a	patent. If an assign in assignment.	nee is identified below, the d	ocument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Robert Reiser + Co. Inc. CANTON MA.								
10001	<b>4</b> -11		. 0,	100	اردان	•		
	iate assignee category or catego				🗆 individual 🚜	corporation or other private gr	oup entity 🔾 government	
4a. The following fee(s):	are enclosed:	46	. Payment of		mt of the fee(s) is an	based	•	
☐ A check in the amount of the fee(s) is enclosed.  ☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-203B is attached.								
☐ Advance Order - # of Copies ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpa Deposit Account Number ☐ (enclose an extra copy of this form).							credit_any overpayment, to	
5. Change in Entity Stat	tus (from status indicated above	.)	Deposit Acc	ount Numi	per	(enclose an extra co	opy of this form).	
_ "	SMALL ENTITY status. See 3	•	D b. Applica	nt is not cl	aiming SMALL EN	TITY status. See, e.g., 37 CFF	t 1.27(g)(2).	
NOTE: The Issue Fee an	O is requested to apply the lss:  d Publication Fee (if required)	vill not be accepted	from anyone	y) or to re- other than	apply any previous the applicant; a reg	y paid issue fee to the applica istered attorney or agent; or th	tion identified above. e assignee or other party in	
(Authorized Signature)	ecords of the United States Pan	(Date)	· ·		1	· · · · · · · · · · · · · · · · · · ·		
Tukerd	MR			10/12	104			
This dollection of information an application. Confident	attory is required by 37 CFR 1.3 iality is governed by 35 U.S.C.	11. The informatio 122 and 37 CFR	n is required to	o obtain of lection is e	retain a benefit by tellimated to take 12	he public which is to file (and minutes to complete, includin	by the USPTO to process) g gathering, preparing, and	
submitting the completed this form and/or suggestin Box 1450, Alexandria, V Alexandria, Virginia 223	ation/s required by 37 CFR 1.3 iality is governed by 35 U.S.C. application form to the USPT ons for reducing this burden, slirginia 22213-1450, DO NOT 13-1450,	O. Time will vary to the SEND FEES OR C	depending up Chief Inform COMPLETED	on the ind nation Offi FORMS	ividual case. Any ex cer, U.S. Patent and TO THIS ADDRES:	omments on the amount of the Trademark Office, U.S. Depa S. SEND TO: Commissioner f	or Patents, P.O. Box 1450,	
Under the Paperwork Rec	luction Act of 1995, no persons	are required to res	pond to a coll	ection of i	nformation unless it	displays a valid OMB control	number.	

TRANSMIT THIS FORM WITH FEE(S)

PTOL-85 (Rev. 07/04) Approved for use through 04/30/2007.

OMB 0651-0033 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE